PTO/SB/51 (05-08)
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	Docket Number (Optional)						
REISSUE APPLICATION DECLARATION BY THE INVENTOR	P-3914F1P1P2P1R1						
I hereby declare that: Each inventor's residence, mailing address and citizenship are stated below to be lieve the inventors named below to be the original and first inventor(s) of the patent number6.053.929, grantedApril 23, 2 reissue patent is sought on the invention entitled	the subject matter which is described and claimed						
the specification of which							
is attached hereto.  was filed on January 26, 2001  and was amended on 12/8/03, 3/4/04, 10/27/04, 4/18/05, 2/9/06, 5/30/  (If applicable)							
I have reviewed and understand the contents of the above-identified specifical amendment referred to above.  I acknowledge the duty to disclose information which is material to patentability.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b), Attached is form PTO/SB/02B (or equivalent) listing the foreign applications.							
I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)							
by reason of a defective specification or drawing.							
by reason of the patentee claiming more or less than he had the right to claim in the patent.							
by reason of other errors.							
At least one error upon which reissue is based is described below. If the reissue, such must be stated with an explanation as to the nature of the broad							
The invention as claimed was unnecessarily limited. Originare too narrow because they all include a means to substitute shield with respect to the blade holder unless the cartridg In addition, an inventor (Anthony J. Kosinski) was incorrected.	antially prevent movement of the e is mounted on the handle.						

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)			Docket Number (Optional)				
(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)  [P-3914F1P1P2P1R1  All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.							
Note: To appoint a power of attorney, use form PTO/SB/81.							
Correspondence Address: Direct all communications about th	e applicat	ion to:					
✓ The address associated with Customer Number: 26:	253						
OR							
Individual Name							
Address							
City	State	<del></del>		I	Zip		
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Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identity theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.							
Full name of sole or first inventor (given name, family name)  Bradley M. Wilkinson							
Inventor signature	Date	200					
Residence	03/23/09 Citizenship						
North Haledon, NJ	USA	isi iib					
Mailing Address							
39 Hillside Drive, 07508							
Full name of second joint inventor (given name, family name) Anthony J. Kosinski							
Inventorio cianatura	Date	,	7	<del></del>			
Jath Skowl		9/14	109				
Residence USA	Citizer	nship USA					
Mailing Address 79 PAINCETO ~ DAINE NEW PANNER CE, NJ 07974							
Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or 02LR attached hereto.							

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DECLARATION ADDITIONAL INVENTOR(S) Supplemental Sheet Page—			Page of			
Name of Additional Joint Inventor, if any	y: A petition has been filed for this			unsigned inventor		
Given Name (first and middle (if any))	Family Name o					
Charles	H	wang				
Inventor's Signature			23 M2CH Date 2009 USA			
WAUTHAM Residence: City	State Country			U SA Citizenship		
APT 172B LOS BLACK BEAR Mailing Address						
City WACTHAM	State	<i>+</i>	02451 Zip	USA Country		
Name of Additional Joint Inventor, if any	<i>r</i> :	A petition	n has been filed for this ur	nsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname				
Ann		Eckert				
Inventor's Signature				Date		
Residence: City	State Country			Citizenship		
Mailing Address						
City	State	Zip		Country		
Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any))			Family Name or Surname			
Simon		Cohn				
Inventor's Signature				Date		
Residence: City	State		Country	Citizenship		
Mailing Address		-		<u> </u>		
City	State	Zin		Country		

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DECLARATION	DECLARATION  ADDITIONAL INVENTOR(5) Supplemental Sheet Page of					
Name of Additional Joint Inventor, if any	/:	A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))		Family Name or				
Charles		Hw	/ang	•		
Inventor's Signature				Date		
Residence: City	State	Country		Citizenship		
Mailing Address		· · · · · · · · · · · · · · · · · · ·		·		
City	State	Zip		Country		
Name of Additional Joint Inventor, if any	<i>r</i> :	A petition	has been filed for this u	nsigned inventor		
Given Name (first and middle (if any))	() == = = ·		Family Name or S	umame		
Ann			Eckert			
Inventor's AM Eckert	Inn Eckert			3/27/09 Date		
Nazareth Residence: City	Pennsylvania USA			U.S., Citizenship		
Mailing Address 2376 Keelev K	oad					
city Nazareth	Pennsy	Pennsylvania zip18064		Country USA		
Name of Additional Joint Inventor, if any:  A pelition has been filed for this unsigned inventor						
Given Name (first and middle (if any)) Fal			Family Name or S	Family Name or Surname		
Simon	Cohn					
Inventor's Signature				Date		
	State Country		Country	Citizenship		
Residence: City	. Otale		( and the first of			
Mailing Address				_		
City	State		Zip	Country		

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page of					
Name of Additional Joint Inventor, if any	/:	A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any)							
			Gharibian				
Inventor's January	)		-	Date	3/24/09		
Inventor's Signature School ALE  Residence: City	State Ca	A COL	ıntry	Citize	nship US		
Mailing Address 1501 Sunsi	HINE .	DRIVE			· •		
City GLENDA-LE	State Ci	*	Zip 9/208	Count	ry		
Name of Additional Joint Inventor, if any	/: · · · ·	A petition	has been filed for this u	nsigned	inventor		
Given Name (first and middle (if any)	• - •		Family Name or S	urname	,		
					<u> </u>		
inventor's Signature				Date			
Residence: City	State		Country		Citizenship		
Mailing Address							
Walling / Northese			-				
City	State		Zip	Country			
Name of Additional Joint Inventor, if an	y:	A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any)) Family Name or Surname				<u> </u>			
			<u></u>		,		
Inventor's Signature	<del>,</del>			Date	·		
Residence: City	State	· · · · · · · · · · · · · · · · · · ·	Country		Citizenship		
Mailing Address	-						
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City	State	Zip		Country			

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